FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1 (See instructions)												
			Office use only									
1. NAME OF COMMITTEE (ii	n full)	(Check if name is changed)		nple: If typyir the lines	ng, type	12F	E4M	5				
Jobs, Econol	my and Budget F	und (JEB Fund)				ш		ш				Ш
			111		111			1.1				
ADDRESS (number and	d street) 731	5 Wisconsin Ave	nue			ш						
(Check if ad		te 310 East			1 1 1			11		1.1		
is changed)		Bethesda				L M	D	20814 3202				
001441775510 5 14	AU ADDD500		CITY▲				Έ Δ		ZIP CODE 📥			
COMMITTEE'S E-M												
cfs@talentpa	ymaster.com 					ш				Ш	ш	
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COMMITTEE'S WEE	B PAGE ADDRESS (URL)										
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					1 1 1			11				
2. DATE 0	M / D D /	Y 2008										
3. FEC IDENTIFICATION NUMBER C C00420695												
4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)												
I certify that I have exar Type or Print Name of		nd to the best of my kno	_	d belief it is tr	ue, correct a	and comp	lete					
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Signature of Treasure	er Electronically Fi	led by Brenda P o	ejovich			Date	0		12	/ Y	ž (0 8
NOTE: Submission of t		omplete information ma			· ·		•		of 2 U.S.0	C. S437	g.	
Office Use Only				For further if Federal Electron Toll Free 800 Local 202-69	tion Commis)-424-9530		:		FEC (Revise	FORI ed 12/20		

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